

FIG. 1

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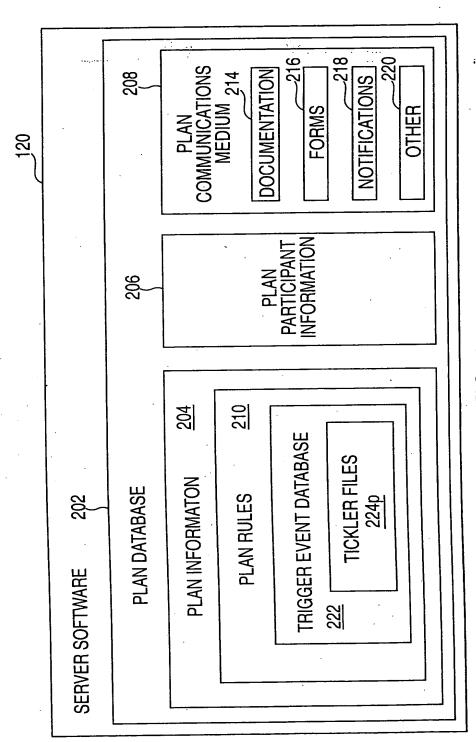


FIG. 2

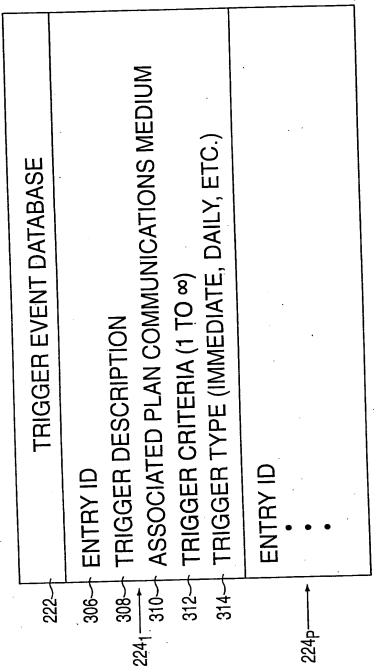
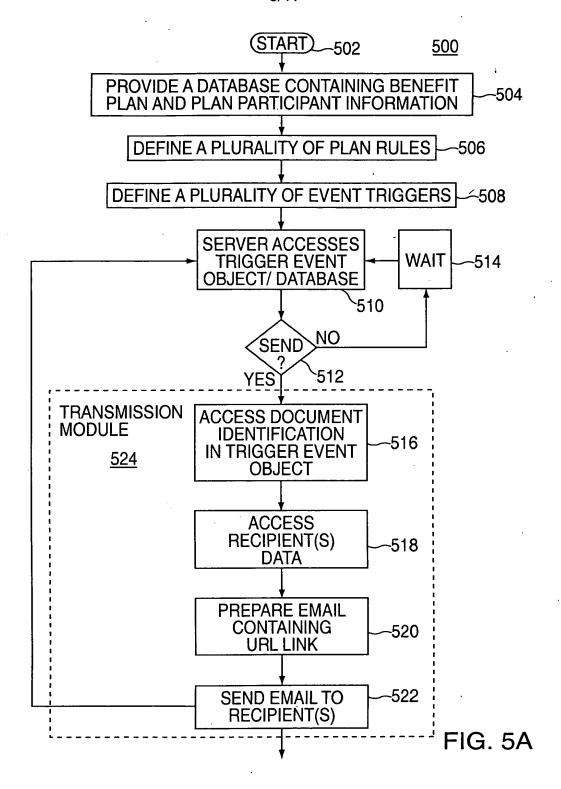


FIG. 3

NOTES 412	WONT APPLY TO MOST DEFINED BENEFITS PLANS OR MONEY PURCHASE PLANS	SOME DEFINED BENEFIT PLANS WILL PAY NO BENEFIT IN THE EVENT OF DEATH A SINGLE PARTICIPANT AND ONLY BENEFIT TO SPOUSE IF MARRIED AND SUCH A PLAN WOULD NOT REQUIRE THIS FORM	• . ·
TYPES OF PLANS APPLICABLE TO 410	ALL PLANS WHICH REQUIRE OR PERMIT EMPLOYEE CONTRIBUTIONS; SOME THAT DO NOT	ALMOST ALL PLANS	PLANS WHICH PERMIT NAMING ANOTHER BENEFICIARY
REQUIRED FIELDS 408	NAME OF EMPLOYEE SOCIAL SECURITY NUMBER DATE OF BIRTH DATE OF BIRTH DATE OF HIRE EMPLOYER'S EIN 3-DIGIT PLAN NUMBER PLAN'S MINIMUM AGE REQUIRED PLAN'S MINIMUM SERVICE REQUIREMENT HOURS OF SERVICE BREAKS IN SERVICE EMPLOYMENT STATUS	NAME OF EMPLOYEE EMPLOYEE MARITAL STATUS SOCIAL SECURITY NUMBER EMPLOYER EIN 3-DIGIT PLAN NUMBER EMPLOYEE'S ENROLLMENT DATE DATE OF REQUEST EMPLOYEE DATE OF BIRTH EMPLOYEE DATE OF BIRTH	NAME OF EMPLOYEE EMPLOYEE MARITAL STATUS SOCIAL SECURITY NUMBER EMPLOYER EIN 3-DIGIT PLAN NUMBER PRIOR CONSENT ON FILE? EMPLOYEE DATE OF BIRTH EMPLOYEE DATE OF HIRE EMPLOYEE DATE OF HIRE EMPLOYEE SEMPLOYMENT STATUS
WHEN 406	BEFORE ENTRY DATE	BEFORE ENTRY DATE AND AS REQUESTED	AS PART OF BENEFICIARY DESIGNATION FORM OR SEPARATE FORM
WH0 404	ELIGIBLE EMPLOYEES BASED ON AGE, SERVICE, CLASSIFICATION, ETC. PER PLAN DOCUMENT	ELIGIBLE EMPLOYEES ALTERNATE PAYEES BENEFICIARIES OF DECEASED PARTICIPANTS, IF PLAN HAS PROVISIONS FOR	ELIGIBLE EMPLOYEES
WHAT 402	ENPOLLMENT FORM	BENEFICIARY DESIGNATION FORM	SPOUSAL CONSENT TO NAMING ANOTHER BENEFICIARY FORM

400 FIG. 4



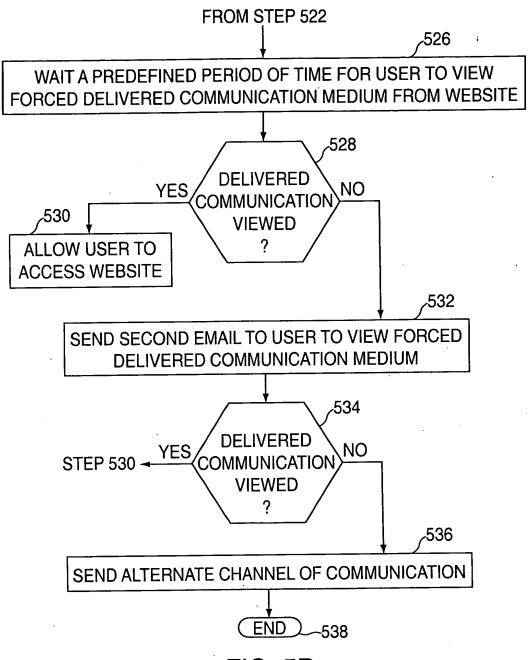


FIG. 5B

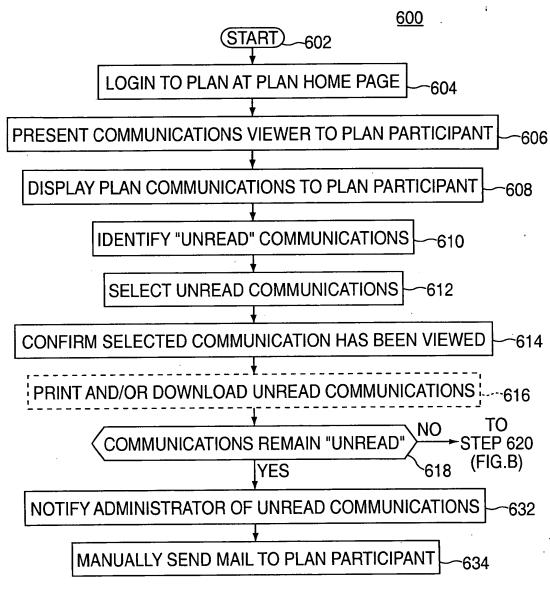
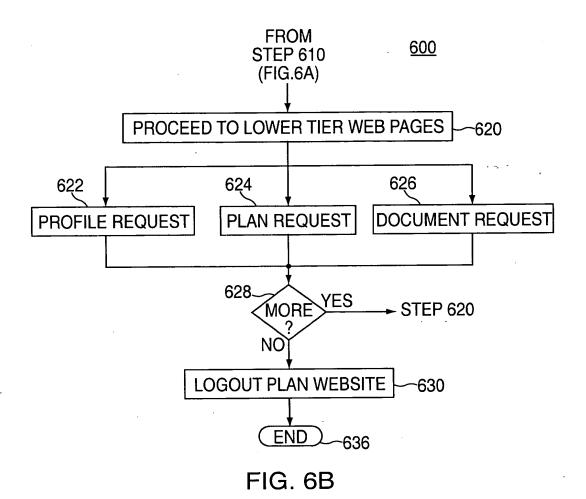


FIG. 6A



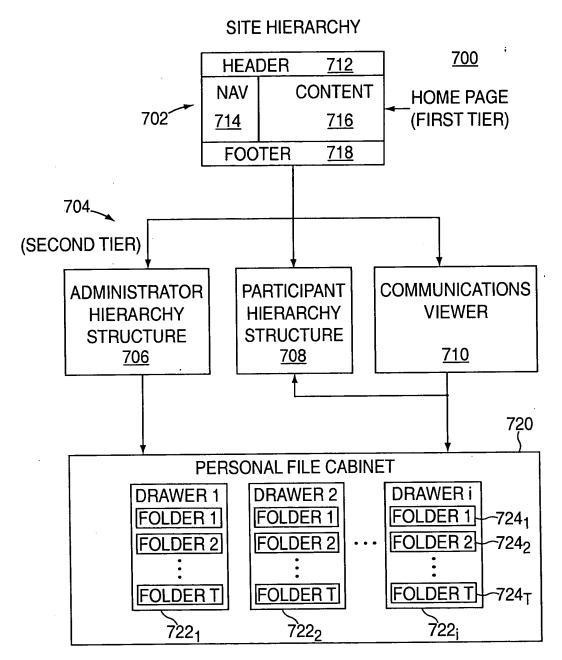


FIG. 7

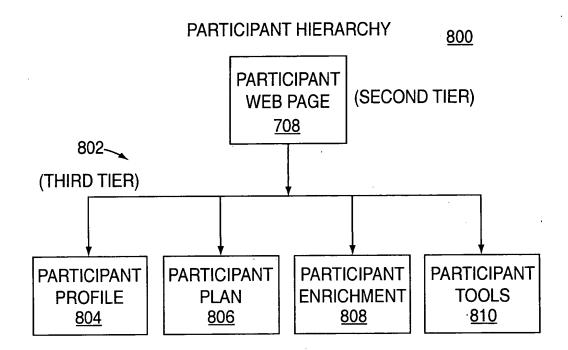


FIG. 8

